CITY COUNCIL REPORT



Meeting Date:

December 10, 2013

General Plan Element:

General Plan Goal:

Land Use

Encourage high quality retail and entertainment.

ACTION

Restaurant Liquor License Request for Salt & Lime Modern Mexican Grille 110-LL-2013. To consider forwarding a recommendation of approval to the Arizona Department of Liquor Licenses and Control for a Series 12 (restaurant) State liquor license for a new location and new owner.

OWNER

Four Fingers LLC

APPLICANT CONTACT

Randy D. Nations

LOCATION

9397 E Shea Blvd #115

BACKGROUND

This request is for a Series 12 (restaurant) liquor license.

See Attachment #3 for number and graphic representation of licenses within a one half-mile radius of this location.

APPLICANT'S PROPOSAL

The applicant is seeking a favorable recommendation on a Series 12 (restaurant) liquor license. This allows the holder of a restaurant license to sell and serve spirituous liquor solely for consumption on the premises of an establishment which derives at least forty percent (40%) of its total revenue from the sale of food.

City Council Report | 110-LL-2013

The applicant has indicated that this establishment will serve liquor between the hours of 11:00 a.m. to 11:00 p.m.; however, due to State liquor license processing requirements, they are not required to notify the City or the State if they change their hours of operation.

PETITIONS FROM PERSONS IN CLOSE PROXIMITY

The applicant has maintained the required posting notice for the State mandated 20-day period. No petitions or protests pursuant to A.R.S. 4-201.b. were received during the 20 (twenty) day posting period.

OTHER LICENSES & PERMITS

Financial Management

Revenue Collection has reported that the applicant has met City licensing requirements and all fees have been paid.

Spirituous Liquor Tax Permit # Pending.

Scottsdale Transaction Privilege Sales Tax License # Pending.

IMPACT ANALYSIS

Current Planning Department Development Information.

This establishment is 2,729 sq. ft. in size, including an proposed 410 sq. ft. patio.

A.R.S. Section 4-112.B.1.; R19-1-310 State Criteria for Restaurant Operations.

This owner intends to operate this location as a restaurant. Staff has assessed the applicant's responses to the State's Restaurant Operation Plan categories: Personnel, Equipment, Menu, Live Entertainment, Bar Games/Televisions, Name of Establishment, Bar Seating Area and Dinnerware. Staff finds that the establishment is designed and intended to operate as a restaurant. The bar service area is 260 sq. ft. or 9% of gross floor area, and the kitchen area is 637 sq. ft. or 23% of the gross floor area. The operational characteristics and floor plan qualify as a restaurant.

Outdoor Patio.

The proposed patio, on the north side of the building is 410 sq. ft. and does not encroach into the adjacent pedestrian walkway. There is a minimum 6 ft. clearance for pedestrian access.

Zoning.

This site is zoned Highway Commercial Planned Community Development (C-3 PCD). The C-3 PCD district allows restaurants as a permitted use. The applicant has been notified of the City's expectation that the business will operate as a restaurant as defined by City Code.

Parking.

A total of 9 spaces are required for this use and 308 spaces are required for the shopping center. A total of 340 spaces are provided in the shopping center. Parking is in compliance with the zoning ordinance.

Public Safety Division

Police Department: Recommendation No Opposition

Major life safety issues: None noted.

Code Enforcement: There are no current cases of code violations at this time in relation to the

liquor license.

STATE GUIDELINES FOR CONSIDERING AN APPLICATION

A.R.S. Section 4.-203.A Granting a License for a New Owner for a Certain Location.

A spirituous liquor license shall be issued only after satisfactory showing of the capability, qualifications and reliability of the applicant.

A.R.S. Section 4-112.B.1; R19-1-102 Criteria for Granting a License for a Certain Location The local governing authorities and the Department of Liquor Licenses & Control may consider the following criteria in determining whether public convenience requires and that the best interest of the community will be substantially served by the issuance or transfer of a liquor license at a particular unlicensed location:

- 1. Petitions and testimony from persons who are in favor of or opposed to the issuance of a license, and who reside in, own or lease property in close proximity.
- 2. The number and series of licenses in close proximity.
- Evidence that all necessary licenses and permits have been obtained from the state and all other governing bodies.
- The residential and commercial population of the community and its likelihood of increasing, decreasing or remaining static.
- 5. Residential and commercial population density in close proximity.
- 6. Evidence concerning the nature of the proposed business, its potential market, and its likely customers.
- 7. Effect on vehicular traffic in close proximity.
- 8. The compatibility of the proposed business with other activity in close proximity.
- 9. The effect or impact of the proposed premises on business or the residential neighborhood whose activities might be affected by granting the license.
- 10. The history for the past five years of liquor violations and reported criminal activity at the proposed premises provided that the applicant has received a detailed report(s) of such activity at least 20 days before the hearing by the Board.
- 11. Comparison of the hours of operation of the proposed premises to the existing businesses in close proximity.
- 12. Proximity to licensed childcare facilities as defined by A.R.S. 36-881.

COUNCIL OPTIONS & STAFF RECOMMENDATION

Council Options

The City Council has the option of recommending approval, denial or no recommendation to the Arizona Department of Liquor Licenses and Control.

Staff Recommendation

The City of Scottsdale staff has conducted a review and advises that the license request meets the criteria imposed for determining that the community's best interest is substantially served by the issuance of the liquor license and advises that the license request meets the criteria imposed for determining the capability, qualifications and reliability of the applicant.

Next Steps

The City Council's recommendation of approval, denial or no recommendation will be forwarded to the Department of Liquor Licenses and Control for their consideration. If the application is approved by the Department of Liquor Licenses and Control, the applicant should receive their license from the State within 105 days of original application.

RESPONSIBLE DEPARTMENT(S)

Teri Gleason, Planning Assistant, tgleason@scottsdaleaz.gov Planning, Neighborhood and Transportation Division

James Wasson, Lieutenant, Special Assignment, jwasson@scottsdaleaz.gov **Public Safety Division**

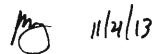
Raun Keagy, Planning, Neighborhood and Transportation Director, rkeagy@scottsdaleaz.gov Planning, Neighborhood and Transportation

APPROVED BY

Tim Curtis, AICP, Current Planning Director 312-4210 tcurtis@scottsdaleaz.gov



Randy Grant, PNT Administrator 312-2664, rgrant@scottsdaleaz.gov



ATTACHMENTS

#1: Aerial Map

#2: Close-up Aerial Map

#3; Graphic – Liquor License Locations Within Half-Mile

#4: City of Scottsdale Applicant Questionnaire

#5: State Application



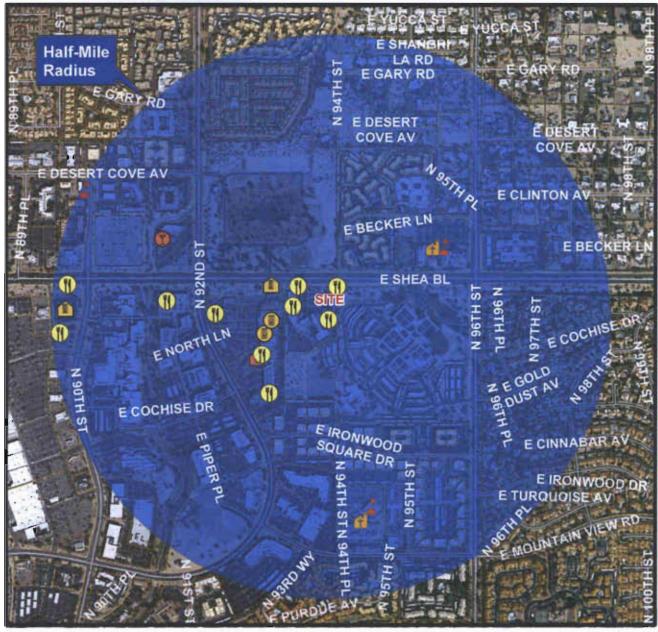
ATTACHMENT #1

Salt & Lime



ATTACHMENT #2

Liquor Licenses Within A Half-Mile Radius of 9597 E Shea Bl., Unit 115



LEGEND

Church

Private School

Legend

Licensed Locations, Count by Series Within a half-mile radius of site

1 - Bar (Series 6)



2 - Beer & Wine Bar (Series 7)



1 - Liquor Store (Series 9)



2 - Beer & Wine Store (Series 10)



10 - Restaurant (Series 12)

Date: 11/15/2013

Total Licenses in Half-Mile Buffer ≈ 16

Note: Liquor License location information is from the Arizona Dept. of Liquor Licenses and Control, and may not represent the exact location of establishments. Data is updated regularily and this map is sometimes printed weeks prior to City Council meetings.

110-LL-2013 Attachment #3



740

1,480

2,220

2,960

Feet



Liquor License Questionnaire

Please complete all questions an	d return within 3 business days.
Name of Business; Salt & Lime Modern Mexican G	rill
Business Address: 9397 E Shea Blvd #115 Scottsd	
Type of Business (restaurant, bar, grocery, retail) Res	staurant
Total Gross Square Footage of Establishment: 2729	
Was there a previous business at this location? !f yes, list the previous business:	☐ Yes ☑ No
Was liquor sold at this location prior to this application of license?	? □Yes ☑ No
Is this business currently open?	Yes V No
If yes, is this business operating with an Interim license?	Yes No
If no, what is the proposed opening date? Feb	oruary 2014
Is this business under construction or being remodeled?	Yes □ No
Does this business have an existing patio?	
Does this business have a proposed patio?	140
How many parking spaces are allocated to your busines	s? <u>28</u>
For Restaurants, Bars and Restaurants/Bars: Will the bar service area be in excess of 15% of the gros Will the kitchen be less than 15% of the gross floor area	
Will age verification be required/requested for admittanc during business operations?	
Is a cover charge required for admittance at any time du Will less than 40% of gross revenues be derived from th	
*May require a Condition	al Use Permit
During what hours will the establishment provide full kito	chen service? Sun-Thur 11 am -10 pm Fri-Sal 11 am-11 pm
During what hours will the establishment offer liquor	
Gross square footage of kitchen: 637	
(do not include refrige	rators or areas used for storage of food or beverages)
Gross square footage of bar service area: 260 (includes the floor area under indoor and outdoor bars and the flood or drinks)	loor area behind the bars used for storage, prep and serving of



Liquor License Questionnaire

	Plea	ise complete all question	s and return within 3 business d	lays.
Will th	nis business featur	re any of the following:		
Live B Amplif Adult I	n Dancing? ands? Ted music? Entertainment? nours?	Yes* V No	Karaoke? DJ? Games? Four or more pool tables?	Yes* No Yes* No Yes* No Yes* No
		*May require a C	onditional Use Permit	
ARS 4 County that the	or the Board, the a best interest of the	applicant bears the burden e community will be substa	ing body of a city or town, the Bo of showing that the public conve antially served by the issuance of	enience requires and f this license.
1.			pility to hold a liquor license beca dale and have owned other locaitons	
2.	by the issuance of	the liquor license because	st interest of the community will be: oholic beverage if they choose	
3.	Please describe yo			
not a su applica demolis apply to be resp from ar For mo	ubstitute for the Licen ble to the license. The sh any improvements o Licensee's contemp consible to, separate a my and all govemment	see's obligation to comply with Recommendation is not a . Zoning processes, building plated Improvements and are and apart from this Recommental or other entities including ing zoning processes, building	partment of Liquor Licenses and Co- ith all state, local and federal laws, p permit or regulatory approval to holo g permit processes, and similar regu- completely separate from the Reco- endation, directly obtain all necessal the City's having standing or jurisdic- ng permit processes, and similar reg	policies and regulations of any events or construct or platory requirements may ammendation. Licensee shall ry permits and approvals often over the subject areas.
Print I	Name: Rhonda	Rodriguez Signatu	re: Pha Dooley	Date: 11/6/2013
,	Plannin	g, Neighborhood	and Transportation	Division

7447 E. Indian School Road, Suite 105, Scottsdale, AZ 85251 ◆ Phone: 480-312-7000 ◆ Fax: 480-312-7088

Arizona Department of Liquor Licenses and Control

800 West Washington, 5th Floor Phoenix, Arizona 85007 www.azliquor.gov 602-542-5141

ASK ET

APPLICATION FOR LIQUOR LICENSE TYPE OR PRINT WITH BLACK INK

Notice: Effective Nov. 1, 1997, All						
the business must attend a Depart the Liquor Licensing requirements		aw training course or pr	rovide proof	of attendanc	e within the last five yea	₩.
SECTION 1 This applica				CTION 3	**·	o: ⅓ ∵
MORE THAN ONE LICEN			<u>3</u> ⊑	CTION Z	Type of ownership): ສ ພ
☐ INTERIM PERMIT Comp			_		S. Complete Sectio	n 6 💢
☑ NEW LICENSE Complete	• • •				L Complete Section	n 6
☐ PERSON TRANSFER (Ba					SHIP Complete Sec	
Complete Sections					TION Complete Sec	
LOCATION TRANSFER (-			ABILITY CO. Comp.	lete Section 7
Complete Sections ☐ PROBATE/WILL ASSIGN					nplete Section 8 ENT Complete Sec	-4i 40
Complete Sections					emplete Section 6	cuon iv
☐ GOVERNMENT Complete		• •		OTHER (E)		
SECTION 3 Type of licer 1. Type of License(s): Series	es 12	_ 2. Total fees at	tached:	\$ 194	Department Use On	
APPLICATION FE					:) ARE NOT REF dishonored checks	
SECTION 4 Applicant						
Section 4 Applicant	Mr.					
1. Owner/Agent's Name:		atlons		Randy		D.
(Insert one name ONLY to appear or	n license)	Last		First		Middle
2. Corp./Partnership/L.L.C.:_	Four Fingers LLC					B1051143
	(Exactly as it appea	ers on Articles of Inc. or Ar	rticles of Org	.)		
3. Business Name: Salt & Lir	ne Modern Mexican	Grill				B1051144
o. 200//1000 / 10///	(Exactly as it appea	irs on the exterior of prem	ises)			<u> </u>
4. Principal Street Location	3397 E Shea Blvd Ste	115	Scottsda	ale	Maricopa	85260
4. Principal Street Location	(Do not use PO Bo	k Number)	City		County	Zip
5. Business Phone: Pending	•	ytime Phone: 480-7	•		Email: rhonda@azlic.	•
6. Is the business located wi		I limits of the above	city or tow			
7. Mailing Address: PO Box 2	•		AZ	85244		
-	City		State	Zip		
8. Price paid for license only	bar, beer and wine	, or liquor store: Typ	De	_\$	Туре	\$
		DEPARTMENT US	E ONLY			
Fees: 100 Application	Interim Permit	Site Inspection	- <u>4</u> F	inger Prints		ALL FEES
Is Arizona Statement of	Citizenship & Alier	Status For State E	Benefits co	omplete?	Ø YES □ NO	
Accepted by:	Date:_	11.4.13	L	ic. #1 <u>2</u>	40FPT04	

*Disabled individuals requiring special accommodation, please call (602) 542-9027.

1/7/2013

SECTION 5 Interim Permit:

 If you intend to operate be 4-203.01. 	usiness when your app	plication is pending	g you will need an Interi	m Permit pur	rsuant to A.R.S.
2. There MUST be a valid lice	ense of the same type	you are applying	for currently issued to th	e location.	
3. Enter the license number of			-		
4. Is the license currently in u	use? 🗆 YES 🗆 NO	If no, how lon	g has it been out of use	?	<u></u>
ATTACH THE LICENSE CUI	RRENTLY ISSUED AT	T THE LOCATION	N TO THIS APPLICATION	DN.	PARTNER.
I ,(Print full name)	, declare that I am	the CURRENT C	WNER, AGENT, CLU	B MEMBER,	· · ·
MEMBER, STOCKHOLDER					
			State of	County o	of
X(Signature)		Th	e foregoing instrument	was acknow	•
My commission expires on:			day of Day M	onth .	—————————————————————————————————————
			⊔ay M	Orturi	Tear Ch
			(Signature of N	IOTARY PUBLI	C)
	-			 _	
SECTION 6 Individual or	Partnership Owners	:			
EACH PERSON LISTED MILET CURNIT	A COMPLETED QUESTIONNA	MDE (EODM I ICO404) A	N "ADDI ICANT" TYDE EINGEDI	DEINT CARD AN	D 420 BBOOFFEEBIG FFF
		THE LOIGH LICE IN IT! A	A APPLICATE TIPE PINGER	Iditi Orew, rev	U \$22 PROCESSING FEE
FOR EACH CARD.		ane (Poras Bould), A	W AFEIDANT TIFETINGEN	Tall Orew, rev	D \$22 PROCESSING FEE
FOR EACH CARD. 1. Individual:					
FOR EACH CARD.	Middle	% Owned	Mailing Address		y State Zip
FOR EACH CARD. 1. Individual:					
FOR EACH CARD. 1. Individual:	Middle	% Owned	Malling Address		
FOR EACH CARD. 1. Individual: Last First	Middle	% Owned	Malling Address	Cit	
FOR EACH CARD. 1. Individual: Last First Partnership Name: (Only the	Middle first partner listed will a	% Owned	Malling Address	Cit	y State Zip
FOR EACH CARD. 1. Individual: Last First Partnership Name: (Only the General-Limited Last	Middle first partner listed will a	% Owned	Malling Address	Cit	y State Zip
FOR EACH CARD. 1. Individual: Last First Partnership Name: (Only the second limited Last □ □ □	Middle first partner listed will a	% Owned	Malling Address	Cit	y State Zip
FOR EACH CARD. 1. Individual: Last First Partnership Name: (Only the General-Limited Last	Middle first partner listed will a	% Owned	Malling Address	Cit	y State Zip
FOR EACH CARD. 1. Individual: Last First Partnership Name: (Only the second limited Last □ □ □	Middle first partner listed will a	% Owned	Malling Address	Cit	y State Zip
Partnership Name: (Only the	Middle first partner listed will a	% Owned	Malling Address Malling Address	Cit	y State Zip
Partnership Name: (Only the General-Limited Last Cast Carp. Partnership Name: (Only the General-Limited Last Cast Carp. Ca	first partner listed will a First Middle	% Owned Appear on license) % Owned are in the profits/lo	Malling Address Malling Address) Y R sses of the business?	City City YES C	y State Zip / State Zip E C E N F I
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FEE FOR EACH CAL	RD.	Complete questions 1			and 8.		_
1. Name of Co	rporation/L.L.C.: F	our Fingers LLC					<u>.</u>
	(Exactly as it appears on Arti	•		n or Articles of Organization)		Į
•					rporated/Organized:		
AZ Corporat	ion Commission Fi	le No.:			_ Date authorized to do bu	usiness in AZ:	Liq.
4. AZ L.L.C. Fi	le No: <u>L-1875974-1</u>			Date	authorized to do business		
5. Is Corp./L.L.	C. Non-profit? 🔲 🗅	∕ES ⊠NO					1c.
6. List all direct	tors, officers and m	embers in Corporation	/L.L.C.: Title		Mailing Address		رر)
Роро	Joseph	Michael	Mng. m	nem	15931 N 102nd Pl	Scottsdale AZ 8525	i5
Gerlinger	Jeffrey	Thomas [.]	Mng. me	em	8050 E Theresa Dr	Scottsdale AZ 8525	5
7. List stockho	lders who are cont First Joseph	(ATTACH A rolling persons or who Middle Michael	own 10% o % Owned	or m	T IF NECESSARY) OFE: Mailing Address 31 N 102nd Pl	City State Zip Scottsdale AZ 85255	
Gerlinger	Jeffrey	Thomas	50	8050	DE Theresa Dr	Scottsdale AZ 85255	
		(ATTAOLIA			T IF NECESSARY)		_
		ned by another entity,	attach a pe	ercer	ntage of ownership chart, a	and a director/officer/membr	
	ıb:			AN "A	Date Charte	CARD, AND \$22 PROCESSING FEE red:	s)
2. Is club non-	profit?	□NÔ					
3. List officer a						-1	
Last	First	Middle	Title		Mailing Address	City State Zip	
	_						

3

SECTION 7 Corporation/Limited Liability Co.:

(ATTACH ADDITIONAL SHEET IF NECESSARY)

Current Licensee's Name (Exactly as it appears on license)		Last	First	Middle	
2. Assignee's Name:		•			•
_	Last		First	Middle	
3. License Type:				e of Last Renewal; _	
4. ATTACH TO THIS APPLICA DECREE THAT SPECIFICA					
SECTION 10 Governme	ent: (for cities, tow	ns, or countles on	ly)		
Governmental Entity:					
2. Person/designee:	Last	First	Middle	Contact Pf	none Number
A SEPARATE LICENSI	E MUST BE OBTAI	NED FOR EACH PR	EMISES FROM WHI	CH SPIRITUOUS LIQ	UOR IS SERVED. 👼
SECTION 11 Person to					4
Questions to be completed	by CURRENT LIC	ENSEE (Bars and I	Liquor Stores ONL	Y-Series 06,07, and	09).
1. Current Licensee's Name	:			Entity:	<u> </u>
(Exactly as it appears on license)	Last	First	Midd	le	(Indiv., Agent, etc.) 🛣 ເມ
2. Corporation/L.L.C. Name:	Exactly as it appe	ears on license)			
3. Current Business Name:					
). Quitent business Hame.	(Exactly as it appe	ears on license)			_
I. Physical Street Location of	of Business: Street				
······································					·
5. License Type:	Lic	cense Number			
6. If more than one license t	o be transfered: Lic	ense Type:	Lice	nse Number.	
7. Current Mailing Address:	Street				
(Other than business)	01001			·	-
	City, State, Zip_		<u> </u>		
8. Have all creditors, lien hol	lders, interest holde	ers, etc. been notifie	d of this transfer?	☐ YES ☐ NO	
Does the applicant intend 5 of this application, attach	to operate the bus ch fee, and current	iness while this appl license to this appl	lication is pending? ication.	☐ YES ☐ NO If ye	es, complete Section
10. I,(print full name)		, hereby au	uthorize the departm	ent to process this a	pplication to transfer th
privilege of the license to conditions, I certify that the	ne applicant now or	wns or will own the r	property rights of the	license by the date	of issue.
i,		, declare that	t I am the CURREN	COWNER, AGENT,	MEMBER, PARTNER
STOCKHOLDER, or LICE true, correct, and comple	ENSEE of the state	d license. I have re	ad the above Sectio	n 11 and confirm tha	t all statements are
				County	
(Signature of C	CURRENT LICENSEE)		The foregoing	instrument was ackn	owledged before me th
My commission expires on:			Day	Month	Year
, 20				The of HOTADY OF ICE	<u></u>
		4	(Sign	nature of NOTARY PUBLI	<i>-</i> ,

SECTION 12 Location to Location Transfer: (Bars and Liquor Stores ONLY) APPLICANTS CANNOT OPERATE UNDER A LOCATION TRANSFER UNTIL IT IS APPROVED BY THE STATE

Current Business:					
(Exactly as it appears on lice			-		
2. New Business:	Name				
(Physical Street Location)	Address				
3. License Type:					
4. If more than one license t	o be transferred: Lice	nse Type:	License	Number:	
5. What date do you plan to	move?		What date do you p	lan to open?	<u></u>
SECTION 13 Question		olicants <u>excludin</u>	g those applying for g		notel and
A.R.S. § 4-207 (A) and (B) state tha the director, within three hundred (3) kindergarten programs or grades on The above paragraph DOES NOT a	00) horizontal feet of a chu le (1) through (12) or withi	irch, within three hund	ired (300) horizontal feet of a	public or private school	building with
a) Restaurant license (§ 4-20 b) Hotel/motel license (§ 4-20		•	Government license (§ 4-205 Fenced playing area of a golf	•	ය ජූ
Distance to nearest so		•			
	•		City, Stat	e, Zip	
2. Distance to nearest chu	urch: ft.	Name of church			
	A	Address			
3. I am the:	☐ Sublessee [Owner P	City, State urchaser (of premises)	e, ∠ıp	
4. If the premises is leased g	give lessors: Name 94	Hundred Shea LLL	o		<u> </u>
•		397 E Shea Blvd Sco	ottsdale AZ 85260		
4a. Monthly rental/lease rat	գ ¢ 6.500.00 ւ		City, State,		
4b. What is the penalty if th				<u> </u>	
5. What is the total <u>business</u> Please list lenders you ow	indebtedness for this li		(give details - atta	ach additional sheet if	necessary)
Last First	Middle	Amount Owed	Mailing Address	City State	Zip
				_	
			-		
	(ATTA	CH ADDITIONAL SHE	ET IF NECESSARY)		

5

6. What type of business will this license be used for (be specific)? Restaurant

SECTION 13 - continued 7. Has a license or a transfer license for the premises on this application been denied by the state within the past one (1) year? YES	•
YES NO	SECTION 13 - continued
9. Is the premises currently licensed with a liquor license? YES NO If yes, give license number and licensee's name: License #	
SECTION 14 Restaurant or hotel/motel license applicants:	8. Does any spirituous liquor manufacturer, wholesaler, or employee have any interest in your business? YES NO
SECTION 14 Restaurant or hotel/motel license applicants: 1. Is there an existing restaurant or hotel/motel liquor license at the proposed location? YES NO A	9. Is the premises currently licensed with a liquor license? ☐ YES ☑ NO If yes, give license number and licensee's name:
1. Is there an existing restaurant or hotel/motel liquor license at the proposed location?	License #(exactly as it appears on license) Name
If yes, give the name of licensee, Agent or a company name: Last First And license #:	
3. All restaurant and hotel/motel applicants must complete a Restaurant Operation Plan (Form LIC0114) provided by the Department of Liquor Licenses and Control. 4. As stated in A.R.S. § 4-205.02.G.2, a restaurant is an establishment which derives at least 40 percent of its gross revenue from the sale of food. Gross revenue is the revenue derived from all sales of food and spirituous liquor on the licensed premises. By applying for this □ hotel/motel ☒ restaurant license, I certify that I understand that I must maintain a minimum of 40 percent food sales based on these definitions and have included the Restaurant Hotel/Motel Records Required for Audit (form LIC 1013) with this application. As stated in A.R.S. § 4-205.02 (B), I understand it is my responsibility to contact the Department of Liquor Licenses and Control to schedule an inspection when all tables and chairs are on site, kitchen equipment, and, if applicable, patio barriers are in place on the licensed premises. With the exception of the patio barriers, these items are not required to be properly installed for this inspection. Failure to schedule an inspection will delay issuance of the license. If you are not ready for your inspection 90 days after filing your application, please request an extension in writing, specify why the extension is necessary, and the new inspection date you are requesting. To schedule your site inspection will be understanded to the "Information" tab. SECTION 15 Diagram of Premises: (Blueprints not accepted, diagram must be on this form) 1. Check ALL boxes that apply to your business: Entrances/Exits Entrances/Exits Liquor storage areas Patio: ☐ Contiguous Gervice windows Drive-in windows Non Contiguous Applicants initials Section 1. Service windows Applicants initials Non Contiguous Applicants initials	1. Is there an existing restaurant or hotel/motel liquor license at the proposed location? YES NO If yes, give the name of licensee, Agent or a company name:
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••	If yes, what is your estimated opening date? January 2014
	••

the locations of all kitchen equipment and dining furniture. Diagram paper is provided on page 7.

4. The diagram (a detailed floor plan) you provide is required to disclose only the area(s) where spiritous liquor is to be sold, served, consumed, dispensed, possessed, or stored on the premises unless it is a restaurant (see #3 above).

5. Provide the square footage or outside dimensions of the licensed premises. Please do not include non-licensed premises. such as parking lots, living quarters, etc.

As stated in A.R.S. § 4-207.01(B), I understand it is my responsibility to notify the Department of Liquor Licenses and Control when there are changes to boundaries, entrances, exits, added or deleted doors, windows or service windows or increase or decrease to the square footage after submitting this initial drawing.

applicants initials

dispensed, possessed or stored. It must s hi-top tables, dining tables, dining chairs, t include parking lots, living quarters, etc. V If a legible copy of a rendering or draw	thow all entrances, exits, interior walls, bars, bar stools the kitchen, dance floor, stage, and game room. Do not when completing diagram, North is up † ving of your diagram of premises is attached to this is "diagram attached" in box provided below.
	Attached
	· · · · · · · · · · · · · · · · · · ·
	15V
	了 强 血
SECTION 16 Signature Block	
Randy D. Nations , h	nereby declare that I am the OWNER/AGENT filing this
application as stated in Section 4, Question 1, true, correct and complete.	. I have read this application and verify all statements to be
(signature of applicant listed in Section 4, Question 1)	
	State ofCounty ofCounty of
RHONDA J RODRIGUEZ	The foregoing instrument was acknowledged before me this White the foregoing instrument was acknowledged before me this Month Year
My commission expires on Markopa County My Commission Expires My Commission Expires Months 126, 2016	Wender & Warrang Signature of NOTARY PUBLIC

SECTION 15 Diagram of Premises

GUACAMOLE

BLACK BEAN DIP

Homemade avocado, tomato, onion & cilantro

Purred black bean with onlon Serrano with chips

QUESO FUNDIDO

NACHOS

Queso asadero melted with choice of mushroom, chorizo, or plain Classic chips topped with carne asada, sour cream queso, & pico de gallo

MEXI-WINGS

COCTEL DE CAMARON

Chipotle spiced wings

Shrimp in a tomato spiced broth with chips

SOPA DE TORTILLA

Chicken soup topped with fried tortilla & avocado

TORTAS

ALL SANDWICHES SERVED WITH LETTUCE, TOAMATO, AVOCADO & ONION. CHOICE OF HOUSE SALAD UR FRIES

CARNE ASADA

CHORIZO

Thinly sliced steak

Mexican style sausage

POLLO AL CARBON

CARNITAS

Chicken cooked on the grill

Fried chopped marinated pork

ENSALAD

HOUSE

TEQUILA LIME SALAD

Lettuce, tomato, cucumber & carrots

Tequila glazed salmon over mixed greens

CHOP

THREE BEAN

Chopped lettuce, egg, ham, tortilla, bean & avocado

Black, pinto, garbonzo with tomato, onion & cilantro

QUESADILLA

FLOUR TORTILA GRILLED CHEESE, ASADERNO & OAXACA BLENO

CARNE ASADA

CHICKEN

CHORIZO

CARNITAS

SIDES

PICO DE GALLO

VEGETABLES

BLACK BEANS

MEXICAN RICE

FRESH CUT FRIES

BORRACHO BEANS

WRAPPED IN FLOUR TORTILLA WITH BLACK BEAN OR BORRACHO BEAN

CARNITA

FISH

Fried chopped, slow cooked park

Breaded & fried fresh fish

CARNE ASADA

CHICKEN TINGA

Grilled thinly sliced steak

Shredded chicken in chipotle tomato sauce

CHICKEN ASADA

AL PASTOR

Grilled chicken breast

Marinated pork with pineapple & onion

TACOS

THREE CORN TORTILLA SERVED WITH BLACK NEAN, BORRACHO BEAN OR RICE

CARNE ASADA

SHRIMP VERA CRUZ

Grilled thinly sliced steak

Onion, green, red, poblano pepper sauce

CHORIZO ON PAPA

CARNITAS

Mexican sausage with potato

Slow cooked chopped pork

CHICKEN ASADO

CALLA BACITA

Grilled chicken breast

Mexican zucchini

CHICKEN TINGA

LOBSTER

Shredded chicken in chipotle tomato sauce

Butter poached lobster

SHRIMP ALL DIABLA

FISH

Spicy tomato, onion sauce

Breaded & fried fresh fish

SHRIMP EN CREMA

AL PASTOR

Sour cream, cilantro, poblano pepper sauce

Marinated pork with pineapple & onlon

CARNE TINGA

Shredded beef in chipotle tomato sauce

HOUSE SPECIALS

SERVED WITH CHOICE OF BEANS & RICE

ARRACHERA

SALMON AL CARBON

Marinated skirt steak

Fresh grilled salmon tequila lime glaze

CHILE RELLANO

ENCHILANDAS

2 stuffed poblano, cheese or beef with green sauce Three flour wrapped chicken or beef with housemade sauce

SANTA FE BURGER

TAMALES

% Ib angus beef, roasted poblano chipotle ketchup

Three corn wrapped dumpling with chicken or beef